

PART B – FEE(S) TRANSMITTAL

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23494 7590 12/26/2006

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| | |
|----------------------------|--------------------|
| Robin E. Barnum | (Depositor's name) |
| / Robin E. Barnum / | (Signature) |
| January 29, 2007 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/690,119 | 10/21/2003 | Clayton Gibbs | TI-34137 | 3655 |

TITLE OF INVENTION: FIFO Interface for Flag-Initiated DMA Frame Synchro-Burst Operation

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | PREV. PD IF | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|-------------|------------------|------------|
| nonprovisional | NO | \$1,400 | \$300 | \$0 | \$1,700 | 03/26/2007 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------------|----------|----------------|
| Franklin, Richard B | 2181 | 706-016000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert D. Marshall, Jr.
2 W. James Brady
3 Frederick J. Telecky, Jr.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to **Deposit Account Number 20-0668** (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature / Robert D. Marshall, Jr. /

Date January 29, 2007

Typed or printed name Robert D. Marshall, Jr.

Registration No. 28,527

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